PTO/SB/06 (8-96)
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re required to respond to a collection of information unless it displays a valid OMB control number. Act of 1995, no persons Under the Paperwork Reduction Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 600-015 OTHER THAN CLAIMS AS FILED - PART I SMALL ENTITY OR **SMALL ENTITY** (Column 2) (Column 1) FOR NUMBER EXTRA NUMBER FILED RATE RATE FEE FEE The second BASIC FEE s 380. OR \$ (37 CFR 1.16(a)) TOTAL CLAIMS minus 20 = 0 0 OR INDEPENDENT CLAIMS minus 3 =0 OR (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) \circ OR # 380 OR TOTAL TOTAL. * If the difference in column 1 is less then zero, enter "0" in column 2 OTHER THAN CLAIMS AS AMENDED - PART II OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) (Column 3) **CLAIMS HIGHEST** and the second ADDI-ADDI-REMAINING **PRESENT** NUMBER **RATE** TIONAL RATE TIONAL WENT TO THE **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE **FEE** AMENDMENT PAID FOR OR Total 17 37 Minus 20 #153:-(37 CFR 1.16(c)) OR Independent 2 Minus 3 O OR (37 CFR 1.16(d)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR #153. TOTAL TOTAL OR ADDIT, FEE (Column 1) (Column 3) ADDIT. FEE (Column 2) **CLAIMS HIGHEST** ADDI-ADDI-REMAINING **PRESENT** NUMBER **RATE TIONAL** TIONAL **RATE AMENDMENT AFTER PREVIOUSLY EXTRA** FEE **FEE** AMENDMENT PAID FOR OR Total = Minus (37 CFR 1.16(c)) OR Independent Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS **HIGHEST** ADDI-ADDI-REMAINING **PRESENT** NUMBER TIONAL RATE TIONAL **RATE AMENDMENT**

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

AFTER

Total

(37 CFR 1.16(c))

Independent

(37 CFR 1.16(b))

AMENDMENT

Minus

Minus

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

PREVIOUSLY

PAID FOR

EXTRA

(37 CFR 1.16(d))

=

=

FEE

TOTAL

ADDIT. FEE

OR

OR

OR

OR

OR

TOTAL

ADDIT. FEE

FEE

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".